

<https://www.ssa.gov/ssi/text-appeals-ussi.htm>

SSI APPEALS PROCESS

You can appeal most determinations and decisions we make about whether you can get Supplemental Security Income (SSI) or if we make changes to your benefit amount. That means you can ask us to look at your case again.

When you ask for an appeal, we will look at the entire determination or decision, even those parts that were in your favor.

HOW TO APPEAL SOCIAL SECURITY DETERMINATIONS AND DECISIONS

We have established appeals procedures for individuals who disagree with the determination(s) or decision(s) we make. The determination(s) or decision(s) that you can appeal are called "initial determinations" and we discuss them further below. The levels of appeal are:

Reconsideration;

Administrative Law Judge Hearing;

Appeals Council Review; and

Federal Court.

INITIAL DETERMINATION

We call the determinations we make that you can appeal "initial determinations." These determinations are SSA's written findings regarding any legal or factual issue, including but are not limited to:

whether or not you are eligible for SSI;

the amount of your SSI payment; and

the fact that you were overpaid and the amount of the [overpayment](#) and whether you must repay it.

After you file an application for SSI, we will mail you a written initial determination. This is your first “initial determination”, but each time we made a determination about your eligibility or payment amount after that is also an initial determination.

Every time we make an initial determination, we will send you a notice. If you want to appeal the initial determination in that notice, you must request an appeal in writing within 60 days of the date you receive your notice. The notice will tell you how to appeal. If you file an appeal within 10 days of the date you receive your notice, your SSI benefits may continue at the same amount until we make a determination on your appeal.

The notice will tell you if you are entitled to continued benefits.

Contact us, and we can help you with your appeal.

You may appoint a representative to act for you in the Social Security appeals process. For information on [Someone Can Help You With Your SSI](#).

STEPS IN THE APPEALS PROCESS

1. RECONSIDERATION

If you disagree with the initial determination, you may request reconsideration by writing to us or by completing a Form SSA 561 (Request for Reconsideration) or a Form SSA-789 (Request for Reconsideration - Disability Cessation). A request for a reconsideration on a disability claim or non-disability issue can also be completed online at www.ssa.gov.

You or your representative must ask in writing for reconsideration **within 60 days** of the date you receive the written

notice of the initial determination. We consider that you receive a notice 5 days after the date on the notice. If you ask for reconsideration in writing **within 10 days** after you receive the notice, any payment we are currently making will continue until we make our reconsideration determination, if you continue to meet all other SSI eligibility requirements.

We will send you (and your representative, if you have one) a notice of the reconsideration determination.

If you appeal a disability cessation and you want to keep receiving benefits until we make a determination, you must make a written request for benefit continuation within 10 days after the date you receive the written notice. You are entitled to a face-to-face hearing with a disability hearing officer.

We have released a new and improved service to check the status of your appeal. The service provides detailed information about disability and Supplemental Security Income appeals filed either online at SocialSecurity.gov or with a Social Security employee. To check the status of your appeal, create or log in to your personal [my Social Security account](#).

2. HEARING

If you disagree with the reconsideration determination, you or your representative may request a hearing before an administrative law judge (ALJ) by writing to us or by completing a [Form HA-501](#) (Request for Hearing by Administrative Law Judge). A request for a hearing can be completed online at: www.ssa.gov. If needed, we can help you complete this form.

You or your representative must request a hearing **within 60 days** after you get the notice of reconsideration determination

(or, in rare cases, the initial determination). We consider that you receive the notice 5 days after the date on the notice. You or your representative may review your file before the hearing and may submit or inform us about new evidence no later than 5 business days before the date of the hearing. You may continue to receive your SSI if you are appealing a determination that your disability has ended. You must ask in writing for your benefits to continue within 10 days of the cessation notice.

If you do *not* want to appear at a hearing before an ALJ, you or your representative may ask the ALJ to make a decision based on the evidence in your file.

If you do want to have a hearing before an ALJ, it is very important that you or your representative appear either in person, by video teleconferencing, or by telephone (in extraordinary circumstances) at the scheduled hearing. However, please note that the Agency determines the manner of appearance. We will provide notice of the hearing date, location, and issues to be decided at least 75 days before the hearing. If for any reason you cannot make it to your hearing, contact the hearing office in writing, as soon as possible before the hearing, but not later than 5 days before the date set for the hearing or 30 days after receiving the notice of hearing, whichever is earlier, and explain why you cannot attend. If you do not attend the scheduled hearing, you may lose your appeal rights and benefits.

We may pay you for travel costs if the distance to the hearing from your home is more than 75 miles one way. If you need money for reasonable and necessary travel costs, tell the ALJ as soon as possible **before** the hearing.

In a disability case, the ALJ may also want you to have more medical exams or tests. We will pay for any exam or test that we require and schedule it for you.

The ALJ may ask other witnesses, such as medical and vocational experts to testify at the hearing. At least 10 business days before the hearing, you (or your representative, if you have one) may ask the ALJ to order certain witnesses to attend the hearing, and the ALJ will decide if the witness' testimony is reasonably necessary. During the hearing, the ALJ will explain your case and may ask you and any of your witnesses questions. You may also ask any witnesses questions and present new evidence under certain circumstances.

You (or your representative, if you have one) must inform the ALJ about or submit all written evidence, objections to the issues, and pre-hearing written statements no later than 5 business days prior to the scheduled hearing and must submit subpoena requests no later than 10 business days prior to the hearing. The ALJ may decline to obtain or consider late submissions of evidence, objections, written statements, or subpoena requests unless you meet certain requirements listed in Social Security's rules at 20 CFR 404.935(b) and 416.1435(b).

The hearing is informal, but we make an audio recording. You may ask for a copy of the hearing recording.

The ALJ will send you (and your representative, if you have one) a copy of the hearing decision.

3. APPEALS COUNCIL

If you disagree with the ALJ's decision, you (or your representative) may request an appeal by writing to us and requesting an Appeals Council review or by completing a [Form HA-520](#) (Request for Review

of Hearing Decision/Order). A request for Appeals Council review can be completed online at www.ssa.gov. We can help you complete this form.

You (or your representative) must ask for an Appeals Council review **within 60 days** after you get the hearing decision. We consider that you receive the hearing decision 5 days after the date on the hearing decision.

The Appeals Council may also decide to review your case on its own within 60 days of the date of the decision.

You or your representative may submit or inform us about new evidence. The Appeals Council will only review a case based on additional evidence if it is new, material, related to the period on or before the hearing decision, and there is a reasonable probability the evidence would change the outcome of the decision.

The Appeals Council will examine your case and will grant, deny, or dismiss your request for review. If the Appeals Council grants your request for review, it will either decide your case or return it to the ALJ for further action, which could include another hearing and a new decision. If the Appeals Council grants your request and plans to issue a decision that is less than fully favorable to you, it will send you (and your representative) a notice of its proposed action and will allow you or your representative an opportunity to respond before issuing the decision.

The Appeals Council will send you (and your representative) a copy of the action it takes on your request for review and explain the reasons for this action.

4. FEDERAL COURT

If the Appeals Council issues a decision or denies your request for review of an ALJ's decision and you disagree with the action of the Appeals Council, you may file a civil action with the U.S. District Court in your area. We cannot help you file a court action. You may want to contact a lawyer or a legal aid group to help you.

You must file an action in U.S. District Court **within 60 days** after you receive the notice of Appeals Council action. We consider that you receive notice of the Appeals Council action 5 days after the date on the notice. The U.S. District Court will review the evidence and the final Agency decision. The District Court may send the case back to the Agency, and the ALJ may be ordered to hold a new hearing and issue a new decision. The District Court may also direct the agency to award benefits or dismiss the case.